

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ms		11/27/99
O.I.P.E. CLASSIFIER		48	11/27/99
FORMALITY REVIEW	BH	60245	11-23-99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Date
Final	
Original	
1	
2	✓
3	✓
4	0
5	✓
6	✓
7	0
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	✓
19	✓
20	0
21	0
22	✓
23	✓
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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